

Volume 6 Issue 5



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## MEDDAC Community News

Kimbrough Amb. Care Center

Kirk US Army Hlth. Clinic

Barquist US Army Hlth. Clinic

Dunham US Army Hlth. Clinic

Letterkenny Occupational Hlth. Clin.

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FIG Troop Medical Clinic

# Enjoy a safe and happy SUMMER

Inside  
This  
Issue:

Health Tips for  
Men

2

Health Tip of  
the Month

*Dealing With  
That Snake in  
the Grass!*

3

USO Orioles  
Tickets!

4

New Warrior  
Team Clinic

5

June & July  
Health Promotion  
Classes

6

Now that the summer months are upon us many are enjoying the activities we have longed for all last winter, but each season presents its own particular joys as well as safety hazards.

During these “lazy, hazy, crazy days of summer” strains, sprains and assorted pains from under-worked muscles or twisted joints can lead to prolonged periods of pain and depression. The dangers of overexposure to sun should never be underestimated.

Before playing strenuous sports, remember to stretch those muscles first. Watch out for water hazards as well— “look before you leap” and **NEVER** dive in unfamiliar waters.

Camping and going on picnics can also hold their share of dangers:

Holes and rocks covered by undergrowth, poison ivy, poison oak...and that “snake in the grass!” (read the article on PAGE 3).

Summer is a time for fun so don’t let unexpected—and avoidable—accidents keep you on the sidelines.

Also remember that injuries not only affect you, but your family, co-workers and the patients who rely on all of us to provide that special Kimbrough patient care that is unequalled anywhere in the military or civilian health care systems.

Have a fun and safe summer.



## Health Issues for Men

Dorothy Lopez, RN, KACC Health Promotions

Any diagnosis of a serious condition is going to cause even the most optimistic patient to become concerned, but when it affects only the opposite sex then the concern can be even harder.

Health risks for men are not recognized due to the “macho” image of masculinity, and failure to adopt health-promoting behaviors. Men’s socialization as boys provides a framework for understanding why men adopt unhealthy lifestyles. Boys actually use unhealthy behaviors to demonstrate manhood; proving they are “real” men by consuming large quantities of alcohol, and attempting to drink and drive. The top health culprits are smoking, poor nutrition, obesity, stress, and lack of exercise.

While health science has of this century frequently used males as subjects, research typically neglects to examine men and the health risks associated with men’s gender. The presumption is that to be a man in America has no bearing on how men work, drink, drive, fight, or take risks. Men are brought up to believe that they must be strong and tough, and behave as if they are indestructible. This makes it hard for them to look after their health: in fact it encourages risk-taking behaviors. Having to be “macho” makes it harder to ask for help from a doctor or provider.

Men have some built in biological problems. The male sex hormone testosterone may raise the level of low density (LDL), the “bad” type of cholesterol that increases the risk of heart disease. Also when they put on weight, fat tends to build up around the waist, the worse possible place in terms of developing the furred-up arteries that cause heart problems.

Despite their high risks, the vast majority of men actually believe that their health is “excellent” or “very good”. Men also know significantly less about self-examinations for testicular cancer than women know about self-examinations for breast cancer. Up to 95% of male breast cancer is first seen by doctors at a stage where they are firm lumps. Other signs can include localized tenderness, discharge, skin ulceration and nipple retraction or inversion.

Because men don’t have monthly cycles, they lack a mechanism that regularly and naturally makes them feel aware of, and in touch with, their bodies. What’s more, men’s reproductive systems don’t require them to maintain any regular contact with health care providers. They don’t need to see a doctor to obtain contraception and of course they don’t get pregnant.

Psychological influences and changes associated with “male menopause” include: hopes are being lost, dreams are left unsatisfied, friends are getting sick, marriages are breaking up, job horizons are narrowing, children are leaving, physical stamina and strength are decreasing, sexual vigor is diminishing, and hormone-production levels are dropping. Other symptoms may be nervousness and irritability, feeling time is running out, anxiety or fear, feeling fat, gaining weight, and indecisiveness.

## Health Tip of the Month

Daniel Kutrick, KACC, Marketing

### Care For The Care-Giver

Many Americans are finding themselves having to care for aging parents while at the same time, raising their own children. This so-called “sandwich generation” can experience a great deal of stress from these demanding roles. To ease the burden, try the following: Be sure to take time for yourself and not feel guilty about it, consider going on a short vacation to revitalize your energies, talk about your difficulties with another person, and don’t forget to take care of your own health.

## Dealing With That Snake in the Grass, By Jim Garamone, American Forces Press Service

We call people we don't like a "snake." We call people who stab us in the back a "snake in the grass." Westerners see snakes as evil, and that seems to color thinking about the reptiles. U.S. service members are based around the world and spend a lot of time in the bush. It's almost inevitable they will confront poisonous snakes. For most of us, there's the temptation to act like a certain "B.C." comic strip character and start whomping them.

But snakes, especially poisonous snakes in the United States, are generally shy and are generally as scared of you as you are of them. Most of the time, snakes will move to avoid you.

In 1989, the most recent year for snakebite statistics worldwide, there were 300,000 reported snakebites. They resulted in 30,000 deaths -- 20,000 in India, said Bela Demeter, a biologist with the department of herpetology at the Smithsonian Institution's National Zoological Park in Washington. In the United States, 7,000 venomous snakebites are reported annually resulting in 15 fatalities. So, even if you are bitten, your odds of surviving are roughly 466 out of 467.

Prevention is the best cure. Males ages 15 to 30 suffer the most venomous snakebites, and most of them occur on the arms from the hand to elbow.

"What's that say to you?" asked Bill Kane, director of education at SOLO, the wilderness education center in

Conway, N.H. "It means these guys are picking up poisonous snakes." Kane said most of these poisonous snakebites

happen in the Southeast and Southwest.

"Just leave them alone," he said. The Centers for Disease Control statistics agree with Kane. The CDC classifies about 3,000 of the snakebites per year as "illegitimate," meaning "these bites occurred while the victim was handling or molesting the snake." CDC statistics show that 85 percent of "legitimate" snakebites in the United States occur below the knee.

Even if a poisonous snake bites you, you've got a 50-50 chance that no venom is injected. Rattlesnakes, cottonmouths and copperheads are pit vipers and are the most common poisonous snakes in America. "They only inject venom when they are striking to eat something," Kane said. "They are not going to eat something the size of a human, so 40 to 50 percent of the time these are dry bites."

Demeter said snake strikes against humans are generally

defensive. "About half of snake bites tend to be dry bites," he said. "If you are bitten, you would know pretty quickly whether poison was injected or not."

Pit vipers inject poison through two fangs. Generally, a bite would create two puncture wounds. If the snake injected venom, the victim will feel intense, burning pain and swelling around the holes.

The species and size of the snake has a lot to do with how dangerous its poison is. "The Mojave rattlesnake has a really bad venom," Demeter said. "And for pure size, the

six-foot Eastern diamondback (rattlesnake) has a massive bite. But you really never know how much is injected, it

runs the spectrum from no venom to a lot."

The one piece of first aid people should remember is to not panic. "Contrary to myth," Demeter said, "there's no such thing as a 'one-stepper' or a 'two-stepper'" -- that's the power of the snake venom expressed as the number of steps you can take before you keel over dead. "The toxicity of these snakes is highly exaggerated." What people need to do is to receive treatment as soon as possible after being bitten, he said.

DoD officials said military medics carry antivenin. A soldier, sailor, airman or Marine bitten by a poisonous snake is generally only minutes away from treatment.

Antivenin is an equine serum; persons sensitive to vaccines

from horses could have an allergic reaction.

"We commonly see that in those who have been treated with the serum before," Demeter said. "Those people stand a higher chance of going into anaphylactic shock."

Treatment for snakebite has changed over the years. Accepted practice no longer involves making X-cuts at or above the fang marks and sucking the poison out with your mouth.

"It's best not to do a whole lot," Demeter said. "If you have not done first aid on a snake bite, then you haven't done anything wrong yet."

The most commonly recommended treatment today is to keep the bite area immobilized below the level of the heart.

Kane said medics can place a light constricting band between the bite and the heart. "The problem is that many

people get carried away," Kane said. "That band turns into a tourniquet. You don't want to do that."

Remove any jewelry the person may be wearing. Swelling from the snakebite can progress rapidly, so rings, watches and bracelets can turn into a real problem. Kane said medics can use a syringe-like Sawyer Extractor to suck venom from the bite site, but that's only effective if used within minutes of a bite.

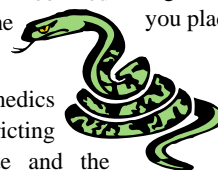
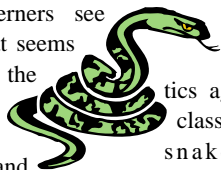
Get the victim to a hospital as quickly as possible.

Antivenin serum is the only sure cure, and because some people are allergic to horse serum it should only be given

in a fully equipped medical facility.

Don't use ice to slow the spread of the venom. Researcher shave found freezing of the stricken limb is a major factor leading to amputation. The best cure for snakebite is prevention. Here's the CDC's tips:

- o Do not play with snakes.
- o Keep landscape well manicured.
- o Wear shoes around the house.
- o Wear gloves when weeding.
- o Wear boots in snake country.
- o Develop the habit of watching where you step and where you place your hands.





Special Offer for our Military!

**TICKETS ONLY \$8.00 EACH**

(Includes one entry into our drawing)

**CASH OR CHECKS ONLY!!!! ALL TICKET SALES ARE FINAL!!!!**

Priority: Active Duty Military & Family Members

## Baltimore Orioles

VS:

Cleveland Indians	Friday, July 1, 2005	7:35 PM
Cleveland Indians	Saturday, July 2, 2005	1:35 PM
Cleveland Indians	Sunday, July 3, 2005	6:05 PM
Chicago White Sox	Friday, July 29, 2005	7:35 PM
Chicago White Sox	Saturday, July 30, 2005	1:20 PM
Chicago White Sox	Sunday, July 31, 2005	1:35 PM
Toronto Blue Jays	Friday, August 12, 2005	7:35 PM
Toronto Blue Jays	Saturday, August 13, 2005	4:35 PM
Toronto Blue Jays	Sunday, August 14, 2005	1:35 PM
Oakland Athletics	Friday, August 26, 2005	7:35 PM
Oakland Athletics	Saturday, August 27, 2005	4:35 PM
Oakland Athletics	Sunday, August 28, 2005	1:35 PM
Tampa Bay Devil Rays	Friday, September 16, 2005	7:35 PM
Tampa Bay Devil Rays	Saturday, September 17, 2005	4:35 PM
Tampa Bay Devil Rays	Sunday, September 18, 2005	1:35 PM
New York Yankees	Tuesday, September 27, 2005	7:05 PM
New York Yankees	Wednesday, September 28, 2005	7:05 PM

AVAILABLE ONLY THRU USO METRO. **CALL (703) 696-2551 (TICKETLINE) or 703-696-0958 FOR MORE INFORMATION.**  
 Tickets are available for pick up at the USO Center, Community Center, Fort Myer, Virginia. End Sale Date: When tickets are gone! Tickets are limited!

A new **Warrior Team** will be established at Kimbrough Ambulatory Care Center on 6 June 2005. This new clinic will enable Kimbrough to consolidate all health care for our TRICARE Prime Active Duty Service Members, ensuring readiness for deployment missions or duties relating to the Global War on Terrorism.

Kimbrough's Prime Active Duty will be reassigned to new Primary Care Managers within the **Warrior Team**. Kimbrough's TRICARE Prime beneficiaries presently enrolled to MAJ Cleaver or LTC Costa will be reassigned to new Primary Care Managers within the Red, White and Blue Teams.

Reassignment of Primary Care Managers will occur during May 16th through May 30th in preparation for the opening of the Warrior Team on June 6th.

For appointments call our appointment line at 301-677-8606.

Our commitment to quality health care for each Kimbrough PRIME beneficiary remains constant. What is changing is only how, where, and by whom Active Duty will obtain care in support of the military mission.





**Kimbrough Ambulatory Care Center**  
**June & July**  
**Health Promotion Classes**

**TOBACCO CESSATION \***

*June 2,6,16,23 from Noon to 1 PM  
July 7, 14, 21, 28 from Noon to 1 PM*

**CHILDBIRTH CLASS \*\***

*July 8 & 15 from 8 AM to Noon*

**10,000 STEPS PROGRAM \*\***

*June 6 from 10 AM to 11 AM  
July 11 from 10 AM to 11AM*

**“Your Prescription for Good Health/OTC  
Card\*\***

*JUNE 2 or 16 from 9:30 AM to 11:30 AM  
JULY 7 or 21 from 9:30 to 11:30 AM*

**TO RENEW YOUR OTC CARD,  
CALL FOR A 15 MINUTE APPOINTMENT  
WITH THE NURSE**

**\*\* ONLY OPEN TO ACTIVE DUTY, THEIR HEALTH  
CARE BENEFICIARIES & RETIREESS  
OPEN TO ACTIVE DUTY, THEIR BENEFICIARIES,  
RETIREEES, & DOD EMPLOYEES**

**\* For registration call, Community Health Nursing at  
(310) 677-/8435**

***Insufficient registrations will force cancellation  
of classes***

**TOBACCO CESSATION PROGRAM**

***Designed to empower all that desire to break  
their addiction to tobacco products – For Life!***

**CHILDBIRTH CLASS**

***Assists the mother-to-be and her coach in  
understanding the physical and emotional  
changes that occur during pregnancy/labor  
and facilitates the transition to parenthood.***

**10,0000 STEPS PROGRAM**

***Courtesy of HealtheForces from Walter Reed,  
CHN is proud to bring you a 6-month walking  
program complete with pedometer for  
measuring steps and mileage. Designed for  
those individuals with cardiac risk factors.  
Blood pressure and weight measurements will be  
taken at intervals.***

**“YOUR PRESCRIPTION FOR GOOD  
HEALTH/OTC CARD”**

***Briefing will address health topics, lifestyle  
changes and preventive services. ENROLLEE to  
TRICARE PRIME REGION 1. The Medicine  
Cabinet/OTC Card is available to TRICARE  
PRIME, KIMBROUGH Enrollees. The class  
will provide recommendations for proper use of  
OTC medications and conclude with the issuing  
of a FREE OTC Medical Card for use at the  
Kimbrough Ambulatory Care Center.***

- \* Classes are held in Kimbrough Ambulatory  
Care Center**
- \* Providers may refer clients using SF 513  
Consultation Sheets**